## DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my

As a below named inventor, I hereby declare the name. I believe I am the original, first and sole is plural names are listed below) of the subject matter ARRAY ANTENNA TRANSCEIVER	at: My reside nventor (if or er which is cla R AND CA	ence, mailing ally one name aimed and for LIBRATIN	address, and Citizensia listed below) or which a patent is s	r an original, fisought on the in	rst and joint nvention enti	inventor (if tled:
ROUTE USED FOR THE SAME						
the application of which  図 is attached hereto		Number or Po (Confirmation	T International A	), and was ( (if applicable	nber amended on e).	
I hereby state that I have reviewed and understa	and the conte	nts of the abo	ve identified appli	cation, includi	ng the claims	s, as amended
by any amendment specifically referred to above I acknowledge the duty to disclose informat continuation-in-part application(s), material infute national or PCT international filing date of the national foreign priority benefits under 3 or plant breeder's rights certificate(s), or 365(s) than the United States of America, listed belopatent, inventor's or plant breeder's rights certificate(s).	tion which is formation whithe continuation of any PCT	s material to ich became avon-in-part apple (a)-(d) or (f), I international identified any PCT international	patentability as railable between the blication.  or 365(b) of any for application(s) which below, by checking applicational application	defined in 37 he filing date of the filing date of the filing date of the filing application of the box, and the filing the box, and the filing a f	of the prior a tion(s) for pa d at least one by foreign ap filing date be	pplication and tent, inventor's e country other plication(s) for fore that of the
		(	Day/Month/ Foreign Filing D	Year)	Priority C Yes	No
Prior Foreign Application Number(s)	Country				₩.	
10000	Japan		30/10/20	02_		, Committee
I hereby claim domestic priority benefits undo States provisional application(s), or §365(c) insofar as the subject matter of each of the International application in the manner provito disclose any information material to the prior application and the na	ne claims of ided by the fir	this applicati	on is not disclosed of Title 35, United in	States Code, 37 C.F.R. 1.56	si 12 Tackno	owledge my dut

d T ty filing date of the prior application and the national or PCT international filing date of this application:

Status U.S. or International Filing Date Prior U.S. or International Application Number(s)

I hereby appoint all attorneys of SUGHRUE MION, PLLC who are listed under the USPTO Customer Number shown below as my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.

PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:								
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Given Name (first and middle [if any])  Family Name or Surname								
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City	ity State			Country				
City State Zip Country  NAME OF THIRD INVENTOR:								
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(first and middle [if any]) Family Name or Surname								
Inventor's Signature		Date						
Residence: City	State	Country		Citizenship				
Mailing Address:								
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NAME OF FIFTH INVENTOR:								
Given Name								
(first and middle [if any]) Family Name or Surname								
Inventor's Signature		Date						
Residence: City	State	Country		Citizenship				
Mailing Address:								
City	State	Zip		Country				